

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04224

FILED
Oct 29, 2009
Secretary of State

Entity Name: THE ARTHRITIS RESEARCH INSTITUTE OF AMERICA, INC.

Current Principal Place of Business:

300 S DUNCAN AVE #188
CLEARWATER, FL 33755

New Principal Place of Business:

Current Mailing Address:

300 S DUNCAN AVE #188
CLEARWATER, FL 33755

New Mailing Address:

FEI Number: 59-2438325

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WILDER, PHD, FRANCES V EXC DIR
300 S. DUNCAN AVE., STE. 188
CLEARWATER, FL 33755 US

Name and Address of New Registered Agent:

FARINA, EDWARD J
300 S. DUNCAN AVE., STE. 188
CLEARWATER, FL 33755 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: EDWARD J FARINA, PT PHD

10/29/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BARRETT, JOHN P JR
Address: 300 S DUNCAN AVE STE 188
City-St-Zip: CLEARWATER, FL 33755

Title: CD () Delete
Name: BROWN, PETER R
Address: 300 S DUNCAN AVE STE 188
City-St-Zip: CLEARWATER, FL 33755

Title: D () Delete
Name: MULOCK, DAVE
Address: 300 S DUNCAN AVE #188
City-St-Zip: CLEARWATER, FL 33755

Title: T () Delete
Name: FARINA, EDWARD J
Address: 300 S. DUNCAN AVENUE #188
City-St-Zip: CLEARWATER, FL 33755

Title: D () Delete
Name: KELLETT, SCOTT
Address: 300 S DUNCAN AVE #188
City-St-Zip: CLEARWATER, FL 33755

Title: D (X) Delete
Name: RHEIN, MARK F
Address: 300 S. DUNCAN AVENUE #188
City-St-Zip: CLEARWATER, FL 33755

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CD (X) Change () Addition
Name: FARINA, EDWARD J PHD
Address: 300 S DUNCAN AVE STE 188
City-St-Zip: CLEARWATER, FL 33755

Title: D (X) Change () Addition
Name: ROMAN, MARK
Address: 300 S DUNCAN AVE #188
City-St-Zip: CLEARWATER, FL 33755

Title: D (X) Change () Addition
Name: RHEIN, MARK F
Address: 300 S. DUNCAN AVENUE #188
City-St-Zip: CLEARWATER, FL 33755

Title: D (X) Change () Addition
Name: ANDERSON, ROBERT PHD
Address: 300 S DUNCAN AVE #188
City-St-Zip: CLEARWATER, FL 33755

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN P BARRETT, MD

PD

10/29/2009

Electronic Signature of Signing Officer or Director

Date